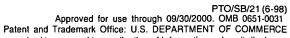
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TRANSMITTAL

FORM

(to be used for all correspondence after initial filing)



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Application Number	09/602,395	6 0
Filing Date	June 22, 2000	100°
First Named Inventor	John T. Moore	77.00
Group Art Unit	2813	LR
Examiner Name	Nguyen, T.	JOM
Attorney Docket Number	MI22-1384 \	

Total Number of Pages in This Submission

Signature

	ENCLOSURES (check all that ap	ply)	
X Fee Transmittal Form	Assignment Papers (for an Application)	After Allowance Communication to Group	
X Fee Attached	Drawing(s)	Appeal Communication to Board of Appeals and Interferences	
Amendment / Response	Licensing-related Papers	Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)	
After Final	Petition Routing Slip (PTO/SB/69) and Accompanying Petition	Proprietary Information	
Affidavits/declaration(s)	Petition to Convert to a Provisional Application	Status Letter	
Extension of Time Request	Power of Attorney, Revocation Change of Correspondence Address	Additional Enclosure(s) (please identify below):	
Express Abandonment Request Supplemental Information Disclosure Statement	Terminal Disclaimer Small Entity Statement Request for Refund	Return Receipt Postcard Copy of cited reference	
Certified Copy of Priority Document(s)	Remarks		
Response to Missing Parts/ Incomplete Application			
Response to Missing Parts under 37 CFR 1.52 or 1.53			
SIGNATU	RE OF APPLICANT, ATTORNEY, OR	AGENT	
Firm or Jennifer J. Taylor, Ph.D.; Wells, St. John, Roberts, Gregory & Matkin, P.S.			
Signature Tennily of Taylor			
Date 0 1 3/1	,2001		
		·	

CERTIFICATE OF MAILING			
I hereby certify that envelope addresse	this correspondence is being deposited with d to: Assistant Commissioner for Patents, Wa	the United States Postal Service as first class mail in an ushington, D.C. 20231 on this date:	
Typed or printed na	Ime Jaime M. White		
Cianoturo	launa misaita	Date 10-31-01	

Burden Hour Statement: This om is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be send to the Chief Information Officer Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

PTO/SB/17 (12/99)

Approved for use through 09/30/2000. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
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FEE TRANSMITTAL for FY 2000

Patent fees are subject to annual revision.

Small Entity payments <u>must</u> be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12.

See 37 C.F.R. §§ 1.27 and 1.28.

TOTAL AMOUNT OF PAYMENT

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Co	omplete if Known	
Application Number	09/602,395	0 -
Filing Date	June 22, 2000	D = 17
First Named Inventor	John T. Moore	2 = 5
Examiner Name	Nguyen, T.	= 0
Group / Art Unit	2813	7 00 1
Attorney Docket No.	MI22-1384	

The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to: Deposit Account Name 23-0925	METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)		
Account Wells, St. John et al. 105 130 205 65 Surcharge - late fling fee or oath 0.00	indicated fees and credit any overpayments to:	Large EntitySmall Entity Fee Fee Fee Fee Fee Pescription		
Deposit Account Wells, St. John et al.	Account 23_0925	Code (\$) Code (\$)	0.00	
Charge Any Additional Fee Required Under 37 CFR §§ 1.18 and 1.17 139 130				
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Check			0.00	
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Large Entity Small Entity Fee		116 380 216 190 Extension for reply within second month	0.00	
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2. EXTRA CLAIM FEES Extra Claims Claims -20** = X X	114 150 214 /5 Provisional filing fee	140 110 240 55 Petition to revive - unavoidable	0.00	
Extra Claims		141 1,210 241 003	0.00	
Total Claims		142 1,210 242 000	0.00	
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and over original patent Other fee (specify)	over original patent	Other fee (specify)	0.00	
SUBTOTAL (2) (\$) Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 180.00		Other fee (specify)	0.00	
	SUBTOTAL (2) (\$)	Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 18	0.00	

SUBMITTED BY		Complete (i	if applicable)
Name (Print/Type) Jennifer J. Taylor, Ph.D.	Registration No. (Attorney/Agent) 48,711	Telephone	509-624-4276
Signature Gennific of Tausler		Date	Out 31, 2001
/ WARNING: /			· · · · · · · · · · · · · · · · · · ·

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